

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory:: Maine

Method for Determining Cost Effectiveness of Caring for  
Certain Disabled Children At Home

In order for an individual to be found eligible to receive services or to continue such eligibility, it must be determined that the total cost of services to that individual during the period encompassed by the proposed plan of care, whether they be nursing facility or extended level services alone or in combination with nursing and home health aide services under Section 40 of the Maine Medical Assistance Manual (concerning Home Health Services), is not expected to exceed the average annual cost to the Medicaid Program of the corresponding level of institutional services that the individual would otherwise be entitled to receive during that same period. It is noted that clients classified at an ICF-MR level of care shall be held to the same expenditure level as clients classified at an nursing facility level of care. The average cost of institutional services will be determined and made public by the Bureau of Medical Services on at least an annual basis. The costs of physical therapy, occupational therapy, speech and hearing services, and medical social services shall not be included in the calculation of either the average annual cost of institutional services or the estimated cost of home health services required by an individual.

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